FORM D



UNITED STATES

SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

21-51945

1	OMB APPR	OVAL
-	OMB Number:	3235-0076
	Expires:	May 31, 2005
	Estimated average burde	en
ļ	hours per response	16.00

	SEC US	E ONLY	
Prefix			Serial
			_
	DATE R	ECEIVED	

Name of Offering ([]] check if this is an amendment and name has changed, and indicate change.) Investment Partnership Interests	
Filing Under (Check box(es) that apply): [] Rule 504 [] Rule 505 [X] Rule 506 [] Section 4(6) [] UI Type of Filing: [X] New Filing [] Amendment	.OE
A. BASIC IDENTIFICATION DATA	1981 1110 10110 41110 10100 11100 11100 11111 88188 11 160 1
Enter the information requested about the issuer	03004565
Name of Issuer ([] check if this is an amendment and name has changed, and indicate change.) River Oaks Financial Fund LP	
Address of Executive Offices (Number and Street, City, State, Zip Code) 12100 Singletree Lane, Suite 187, Eden Prairie, MN 55344	Telephone Number (Including Area Code) 952-746-1307/1308
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	PROOF
Private investment fund	FROCESSEL
Type of Business Organization	/ JAN 1 7 2003
[] corporation [X] limited partnership, already formed [] other (please specify): [] business trust [] limited partnership, to be formed	THOMSON SON
Actual or Estimated Date of Incorporation or Organization:	Month Year [0 9] [X] Actuar (NC) Ated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) [D[E]	

GENERAL INSTRUCTIONS

Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 774(6)

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuer.

Check Box(es) that Apply:	[X] Promoter [] Beneficial Owner [] Executive Officer [] Director [X] General and/or Managing Partner
Full Name (Last name first, if in River Oaks Capital LLC	dividual)
Business or Residence Address (12100 Singletree Lane, Suite 187	Number and Street, City, State, Zip Code) 7, Eden Prairie, MN 55344
Check Box(es) that Apply:	[X] Promoter [X] Beneficial Owner [X] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if in Welch, David	dividual)
Business or Residence Address (12100 Singletree Lane, Suite 18	Number and Street, City, State, Zip Code) 7, Eden Prairie, MN 55344
Check Box(es) that Apply:	[X] Promoter [] Beneficial Owner [X] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if in Johnson, Matthew	dividual)
Business or Residence Address (12100 Singletree Lane, Suite 18	Number and Street, City, State, Zip Code) 7, Eden Prairie, MN 55344
Check Box(es) that Apply:	[] Promoter [X] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if in Jones, Norman M.	dividual)
	Number and Street, City, State, Zip Code) ion, Trustee 505 2 [™] Avenue North, P.O. Box 1980, Fargo, ND 58107-1980
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if in	dividual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if in	dividual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if in	dividual)
Business or Residence Address (Number and Street, City, State, Zip Code)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

				B. INF	ORMATI	ON ABO	UT OFFI	ERING		_				
Has the issuer sold	, or does th	e issuer inte	end to sell,	to non-accr	edited inve	stors in this	offering?				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Yes	
4.			Α	nswer also	in Appendi	x, Column	2, if filing ι	ınder ULO	Ε.					
What is the minim *The General Partner capital contribution of	may, in its	sole discreti	l be accepte ion, permit	d from any	individual?	·	_			••••••		\$		
3. Does the offering p	permit joint	ownership	of a single	unit?										No []
Enter the informat for solicitation of p or dealer registered associated persons	ourchasers in d with the S	n connection EC and/or	n with sales with a state	s of securiti or states, l	es in the of	fering. If a e of the bro	person to b ker or deale	e listed is a er. If more	n associated than five (5	d person or	agent of a l	oroker		
Full Name (Last name	first, if ind	ividual)							-					
Business or Residence	Address (N	lumber and	Street, Cir.	y, State, Zi	p Code)					·	 		······	
Name of Associated B	roker or De	aler						····					,	
States in Which Person	n Listed He	a Colinitad	ar Intende t	o Solicit Du	rahasara									
(Check "All States	" or check i	individual S	States)				•••••	••••••				[] All S	States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Full Name (Last name			(***)	[111]			[,,,,	[,,,,,]	[,,,,]	[112]	()	[***]		
Business or Residence	Address (N	Jumber and	Street, Cit	y, State, Zi	p Code)									
Name of Associated B	roker or De	ealer											,	
States in Which Perso (Check "All States	n Listed Has" or check	s Solicited	or Intends t	o Solicit Pu	ırchasers						• • • • • • • • • • • • • • • • • • • •	[] All S	States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Full Name (Last name	first, if inc	lividual)	 	 										
Business or Residence	Address (N	Number and	Street, Cit	y, State, Zi	p Code)		, , , , , , , , , , , , , , , , , , , ,				·			
Name of Associated E	Broker or De	ealer												
				a v . =										
States in Which Perso (Check "All States						• • • • • • • • • • • • • • • • • • • •		•••••	***********			[] All S	States
[AL] [IL] [MT] [RI]	(AK) (IN) [NE) [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF I	PROC	EEDS		
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box [] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				A
	Type of Security	O	ggregate ffering Price		Amount Already Sold
	Debt	s	0	\$.	0
	Equity	š	0	\$	0
	[] Common [] Preferred			_	
	Convertible Securities (including warrants)	<u> </u>	0 No	. \$ _	0
	Partnership Interests	<u>M</u>	aximum	. \$	3,050,000
	Other (Specify)	s	0	\$	0
	Total	\$ <u>M</u>	No aximum	\$	3,050,000
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors	_	9	\$	3,050,000
	Non-accredited Investors		0	\$	0
	Total (for filings under Rule 504 only)			\$	
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part CQuestion 1.				
	Type of Offering		Type of Security		Dollar Amount Sold
	Rule 505		0	•	0
				°-	
	Regulation A	-	0	_ \$ -	0
	Rule 504	_	0	\$.	0
	Total		0	_ \$	0
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offerir Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to function to the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	ıre			
	Transfer Agent's Fees		[]	\$	0
	Printing and Engraving Costs		[X]	\$	2,500
	Legal Fees		[X]	\$	20,000
	Accounting Fees		[X]	\$	7,500
	Engineering Fees		[]	\$	0
	Sales Commissions (Specify finders' fees separately)		[]	\$	0
	Other Expenses (identify)		[]	\$	0

Total

30,000

[X]

	C. OFFERING PRICE, NUMBER OF I	NVESTORS, EXPENSES AND	USE C)F PI	ROCEEDS			
	b. Enter the difference between the aggregate offering price given in refurnished in response to Part C-Question 4.a. This difference is the "ac	esponse to Part CQuestion 1 and total djusted gross proceeds to the issuer".	l expens	ses			\$_	3,020,000
5.	Indicate below the amount of the adjusted gross proceeds to the issue shown. If the amount for any purpose is not known, furnish an estimat of the payments listed must equal the adjusted gross proceeds to the issue	te and check the box to the left of the	e estima	te. Th	ne total			
	Salaries and fees				Payments to Officers, Directors & Affiliates		•	Payments Others
			[]	\$ <u>_</u>	**	_ []	\$.	0
	Purchase of real estate		[]	\$ _	0	_ []	\$	0
	Purchase, rental or leasing and installation of machinery and equipment of the second	ment	[]	\$ _	0	_ []	\$	0
	Construction or leasing of plant buildings and facilities		[]	\$	0	[]	\$	0
	Acquisition of other businesses (including the value of securities is used in exchange for the assets or securities of another issuer pursuance).		[]	\$_	0	_[]	\$	0
	Repayment of indebtedness		[]	\$_	00	_ []	\$	0
	Working capital		[]	\$_	0	_ []	\$	0
	Other (specify): Investment in financial instruments**		_		0			3,020,000
			- []	\$_		_ []	\$	
	Column Totals		[]	\$_	0	_ []	\$	3,020,000
	Total Payments Listed (column totals added)			[]	\$ 3,020,0 */**	00		
** Par ope	This amount is calculated using the Amount Already Sold, because the issue. The issuer will pay the General Partner a management fee equal to 1% per mer also is entitled to an annual performance allocation from each Limite rating and other expenses, including but not limited to its organization and estment activities and its legal, auditing, accounting, and custodial fees.	r annum of the Fund's net asset value and Partner equal to 20% of the net pro	as of the	e first additio	on, the issuer wi	ll bear a	ll of	its
_	D. FEDI	ERAL SIGNATURE						
an	issuer has duly caused this notice to be signed by the undersigned duly audertaking by the issuer to furnish to the U.S. Securities and Exchange C-accredited investor pursuant to paragraph (b)(2) of Rule 502.							
	er (Print or Type) er Oaks Financial Fund LP	gnature ic 01110 ch		Date	v 13 2002			
Na	ne of Signer (Print or Type)	tle of Signer (Print or Type			y 13, 2003			
		incipal of River Oaks Capital LLC, the	ne Gener	al Par	tner of River Oa	ks Fina	ncial	Fund LP

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE							
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions Yes No of such rule?							
	See Appendix, Column 5, for state response.							
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.							
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.							
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.							
	e undersigned issuer makes the above undertakings and representations only to the extent that they may be required by a state under Section 18 of the urities Act of 1933.							
	e issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized son.							
Issi	uer (Print or Type) Signature Date							
Riv	ver Oaks Financial Fund LP							
Na	me of Signer (Print or Type) Title (Print or Type)							

Principal of River Oaks Capital LLC, the General Partner of River Oaks Financial Fund LP

Instruction:

David Welch

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	Intend fo non-a investors	Type of security and aggregate for non-accredited investors in State (Part B-Item 1) Type of security and aggregate offering price offered in state (Part C-Item 1)			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
}				Number of Accredited		Number of Non-Accredited			Ì
State AL	Yes	No		Investors	Amount	Investors	Amount	Yes	No
AK					<u> </u>		1		
AZ					<u> </u>				
AR						 			-
CA		x	no maximum	1	50,000	0	0		X
co			no maximum	1	30,000				
СТ					-		 		ļ
DE			ļ		-		 		ļ <u>-</u>
DC					-				ļ <u>.</u>
FL					 				
GA									
HI						1.1. _{1.1.}			
			· · · · · · · · · · · · · · · · · · ·						
ID IL		X		1	250,000		1		\
		^	no maximum	1	250,000	0	0		Х
IN									<u> </u>
IA									
KS									
KY									
LA									
ME									
MD									
MA									
MI							<u> </u>		
MN	<u> </u>	Х	no maximum	3	1,500,000	0	0		Х
MS									
MO						····			
MT									
NE									
NV									
NH									
NJ									
NM		X	no maximum	1	250,000	0	0		X
NY									
NC									
ND		х	no maximum	1	500,000	0	0		X
ОН									
OK						···	1		

				APPENDIX					
1	Intend to sell on-accredited investors in State (Part B-Item 1)		Type of security d to sell and aggregate accredited offering price Type of investor and rs in State offered in state amount purchased in State					Disqua under St (if yes explan waiver	5 lification ate ULOE , attach ation of granted) -Item 1)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
OR		X	no maximum	1	250,000	0	0		Х
PA									
RI									
SC									1
SD						-			
TN									
TX									
UT							1		
VT					1	!			
VA						<u> </u>			
WA		Х	no maximum	1	250,000	0	0		X
wv					1			-	

WI WY PR